

Regina 2014 North American Indigenous Games Arts & Crafts Vendor Application

Vendor Name:			
Address:			City:
Province/State:_			Postal/Zip Code:
Home Phone:		Cell Phone:	Fax Number:
E-mail Address:_			
Tribal Affiliation:			
Please indicate the	he type of pro	ducts you will be disp	laying and selling:
Please indicate t	ne type of ven	dor space you wish to	book:
, , ,		•	8' table and one chair) 8' tables and two chairs
Power Required	□ YES □ NO		quired 8' lengthsQuantity (\$20 each) quired Quantity (\$5 each)
this contract. I here personnel, all organ Indigenous Games, North American Ind of the Games, how insurance covering assume responsibility	by agree to ind izations and persections and persections and loss, classes are well as the vendor's process and agree to its. I understand	emnify and hold harmless sons sponsoring, managing aim, penalty or lawsuit in and the Cultural Village. I unot guarantee against lost operty and it is the sole indemnify and defend NAI that the rules and regulat	d agree to abide by all vendor rules and regulations that are a part of the Regina 2014 North American Indigenous Games (NAIG) and it g, or in any other way participating in the Regina 2014 North American any way arising from my operation or involvement in the Regina 2014 and that NAIG will provide security overnight during the courses or damage of any kind. I understand that NAIG does not maintain responsibility of the vendor to obtain such insurance. I, the vendor G and its employees against claims or expenses arising out of the use ions outlined in the Arts & Crafts Vendor Guidelines form part of this
Signature			Date